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				/ October	19, 2007	(Date)
APPLICATION NO	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKETINO	CONFIRMATION NO.
09/923,936	08/07/2001	-	Eric Romanski		2126-179	5169
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) D	UE DATE DUE
nonprovisional	NO	\$1400 144	<b>D</b> \$300	\$0	\$1709	10/19/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS		177	$\mathcal{U}$
SWINEHART, EDWIN L		3617	114-256000	_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a			
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 Ronald R. Santuc listed, no name will be printed.			
			THE PATENT (print or ty	• '		
recordation as set forth	ess an assignee is ident i in 37 CFR 3.11. Comp	ified below, no assignee bletion of this form is NO	data will appear on the p T a substitute for filing an	assignment.	ars knowlene betowach:	s dospopost has been filed for
(A) NAME OF ASSIGNEE  Albany International Corp.			(B) RESIDENCE: (CITY	02 FC:150	<b>34</b>	1440.60 OP 300.00 OP 30.00 OP
		-	Albany, N	lew York		
lease check the appropri	ate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🚨 Cor	poration or other private	group entity Government
la. The following fec(s) a  Issue Fee Publication Fee (N  Advance Order - #	o small entity discount p		b. Payment of Fee(s): (Plead A check is enclosed.  Payment by credit cat  The Director is hereby	rd. Form PTO-2038	is attached.	deficiency, or credit any can extra copy of this form).
5. Change in Entity Stat	us (from status indicates	t above)	overpayment, to Depo	osit Account Number	30-0320(enclose	e an extra copy of this form).
_ ` `	SMALL ENTITY statu	,	☐ b. Applicant is no lon	ger claiming SMALI	ENTITY status. Sec 37	CFR 1.27(g)(2).
						r the assignee or other party ir

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